

ISSUE SLIP STAFF / PEA (for additional cross references)

POSITION	CLASS	ID NO.	DATE
FEE DETERMINATION	1-G		7/34/01
O.I.P.E. CLASSIFIER		8	73001
FORMALITY REVIEW	H-S	866	08-29-01
RESPONSE FORMALITY REVIEW	M.D.	615	03-04-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7-30-01
2	✓	✓	7-30-01
3	✓	✓	7-30-01
4	✓	✓	7-30-01
5	✓	✓	7-30-01
6	✓	✓	7-30-01
7	✓	✓	7-30-01
8	✓	✓	7-30-01
9	✓	✓	7-30-01
10	✓	✓	7-30-01
11	✓	✓	7-30-01
12	✓	✓	7-30-01
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71809  
 3/4/12  
 JC-857  
 8/29

If more than 150 claims or 10 actions  
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